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CONFIRMATION NO. 5582

<b>SERIAL NUMBER</b> 10/633,726	<b>FILING OR 371(c) DATE</b> 08/04/2003 <b>RULE</b>	<b>CLASS</b> 601	<b>GROUP ART UNIT</b> 3768	<b>ATTORNEY DOCKET NO.</b> THERUS.007C1
<b>APPLICANTS</b> Lee Weng, Bellevue, WA; David M. Perozek, Mercer Island, WA; Jimin Zhang, Bellevue, WA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/721,526 11/22/2000 PAT 6,626,855 which claims benefit of 60/167,707 11/26/1999 <i>KF</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY**</b> <i>KF</i> <b>** 10/30/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>KF</i> Allowance Examiner's Signature <i>KF</i> Initials <i>KF</i>		<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 4
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 20995				
<b>TITLE</b> Controlled high efficiency lesion formation using high intensity ultrasound				
<b>FILING FEE RECEIVED</b> 440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	